

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A. BOONE		07-12-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	JM	852	08-17-01
RESPONSE FORMALITY REVIEW	ZM	927	10-10-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	12/6/2 5/23/3 02/03/4
1	✓/0
2	✓/✓
3	0/0
4	✓/✓
5	✓/✓
6	✓/✓
7	✓/✓
8	0/
9	✓/
10	✓/
11	✓/✓
12	✓/✓
13	0/✓
14	✓/0
15	✓/✓
16	✓/✓✓
17	0/0/0
18	✓/✓
19	✓/✓
20	✓/✓/✓
21	✓/✓
22	0/0
23	✓/✓
24	✓/✓
25	✓/✓
26	✓/✓
27	0/0
28	✓/✓
29	✓/✓/0
30	✓/✓
31	0/0
32	✓/✓
33	✓/✓
34	✓/✓
35	✓/✓
36	0/✓
37	✓/✓
38	✓/✓
39	✓/✓
40	✓/✓
41	✓/✓
42	✓/✓
43	✓/✓
44	✓/✓
45	0/0
46	✓/✓
47	✓/✓
48	✓/✓
49	✓/✓/✓
50	✓/0/0

Claim	Date
Final	
Original	12/6/2 5/23/3 02/03/4
51	✓/✓/0
52	✓/✓/1
53	✓/✓
54	✓/✓
55	0/✓
56	✓/0
57	✓/✓/=
58	✓/✓
59	✓/✓/1
60	0/0
61	✓/✓
62	✓/✓
63	✓/✓
64	✓/✓
65	0/✓
66	✓/✓
67	✓/✓
68	✓/✓
69	✓/✓
70	✓/0/✓
71	✓/✓/=
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Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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